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CONFIRMATION NO. 5458

|  |   |  |   |   |                                    |
|--|---|--|---|---|------------------------------------|
| <b>SERIAL NUMBER</b><br>10/502,495   | <b>FILING or 371(c)<br/>DATE</b><br>06/24/2005<br><b>RULE</b>   | <b>CLASS</b><br>514                    | <b>GROUP ART UNIT</b><br>1612   | <b>ATTORNEY DOCKET<br/>NO.</b><br>66741-039 |                                    |
| <b>APPLICANTS</b><br>Geoffrey Lee, Neunkirchen am Brand, GERMANY;<br>Rolf-Markus Szeimies, Zeitlarn, GERMANY;<br>Ulrich Kosciessa, Pinneberg, GERMANY;<br><b>** CONTINUING DATA *****</b><br>This application is a 371 of PCT/EP03/00406 01/16/2003<br><b>** FOREIGN APPLICATIONS *****</b><br>GERMANY 102 02 487.1 01/23/2002<br><b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> |   |  |   |   |                                    |
| Foreign Priority claimed <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>35 USC 119(a-d) conditions met <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No<br>Verified and /SNIGDHA<br>MAEWALL/<br>Acknowledged Examiner's Signature   | <input type="checkbox"/> Met after Allowance<br>SM<br>Initials  | <b>STATE OR<br/>COUNTRY</b><br>GERMANY | <b>SHEETS<br/>DRAWINGS</b><br>0   | <b>TOTAL<br/>CLAIMS</b><br>22               | <b>INDEPENDENT<br/>CLAIMS</b><br>1 |
| <b>ADDRESS</b><br>NEEDLE & ROSENBERG, P.C.<br>SUITE 1000<br>999 PEACHTREE STREET<br>ATLANTA, GA 30309-3915<br>UNITED STATES  |   |  |   |   |                                    |
| <b>TITLE</b><br>Dermal application system for aminolevulinic acid-derivatives  |   |  |   |   |                                    |
| <b>FILING FEE<br/>RECEIVED</b><br>1952   | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |  | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees (Filing)<br><input type="checkbox"/> 1.17 Fees (Processing Ext. of time)<br><input type="checkbox"/> 1.18 Fees (Issue)<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |   |                                    |